## **Amendments to the Specification**

Please replace the paragraph beginning at page 43, line 4, with the following redlined paragraph.

The results show that respiratory immunization with oligo-gp160 formulated with any of the following: (1) proteosomes in saline, (2) proteosomes in the bioadhesive nanoemulsion (pmax) or (3) pmax without proteosomes each enhance specific anti-oligo-gp160 IgG and IgA antibody formation in each of the samples compared to immunizing with the oligo-gp160 without either proteosomes or the bioadhesive nanoemulsion (see Table 6A-6B). Especially for induction of IgG and IgA antibodies in fecal pellets (which reflects rectal or lower intestinal antibody secretion) or in vaginal secretions, (or in lung or intestinal lavage fluids, as shown), proteosome formulation was preferred and the combination of proteosomes with the bioadhesive nanoemulsion was most preferred (Tables 1–7 and 28).

Please replace the paragraph beginning at page 44, line 3, with the following redlined paragraph.

Induction of neutralizing antibodies in vaginal and lung lavage fluids as well as in sera following intranasal immunization of mice with the proteosome-oligo-gp160 vaccine in saline or the proteosome oligo-gp160 vaccine delivered in a bioadhesive solid fat nanoemulsion (pmax) (Figures 3A, 3B, Figures 4A-4C). As shown by the 1.5-3 log reductions in viral titers in vitro (as measured by the p24 assay (pg/ml)), neutralizing antibody in vaginal fluid (VG) (Figure 3A), lung fluid (LG) (Figure 3B) and in sera (Figures 4 and 5Figure 4A) were induced by the proteosome-oligo-gp160 vaccine delivered in saline or the proteosome-oligo-gp160 vaccine formulated with the bioadhesive nanoemulsion (pmax). Vaginal (VG) or lung (LG) fluids from saline controls or pre-immunization sera were unable to elicit antibodies that neutralized the virus as shown by the lack of reduction in viral titers (in the p24 assay) using these control samples.